

14318 Manchester Road Manchester, MO 63011 T: 636-227-1385 F: 636-227-5438 www.manchestermo.gov

City of Manchester

BOARD/COMMISSION Application/Questionnaire

Thank you for interest in serving on one of the City's boards/commissions. Volunteers like you are essential to ensuring that your City government is responsive to the needs of the community. Please help us place you on the most appropriate commission by completing this questionnaire. Feel free to attach a resume.

Please identify your Commission choice(s) in order of p	reference
Planning & Zoning Commission	Board of Adjustment
Historic Review Commission	
Name:	Ward:
Address:	Zip Code
How long have you been a resident of Manchester?	
Daytime Telephone Number:	Evening Telephone Number
Email address:	
Education High School Degree Undergraduate College Degree in Advanced College Degree in Other	
Current Employment Position: Business: Address:	
Other Civic and Volunteer Experience:	
Why do you want to serve on this board/commission?	

What knowledge or skills do you possess that you feel will assist you in serving on this board/commission? Please explain any business or property interests which might place you in a conflict of interest situation should you be appointed to this board/commission? Are you related to any current member of the City Council?	
	yor with the consent of the City Council.
Please return form to: Mayor David Will.	son, c/o City Clerk's Office, City of Manchester or Fax (636)227-5438.
For Office use only Date Received: Date Distributed: Distributed to:	Term Expires: